



The Secretary Drysdale Bowling and Croquet Club Inc

I desire to become a member of the Drysdale Bowling and Croquet Club Inc. If elected I agree to be bound by the constitution rules and by-laws of the club.

Please tick the membership being applied for.

- BOWLING MEMBERSHIP
- CROQUET MEMBERSHIP
- SOCIAL BOWLING MEMBERSHIP NON AFFILIATED
- SOCIAL MEMBERSHIP
- JUNIOR MEMBERSHIP

FULL NAME: _____ DATE OF BIRTH: _____ PHONE: _____

ADDRESS: _____ POSTCODE: _____

EMAIL: _____ OTHER CLUB MEMBERSHIP: _____

APPLICANT SIGNATURE: _____ **DATE:** _____

The above candidate is **personally** known to us and we believe him/her to be a suitable person to be elected a member of the Drysdale Bowling and Croquet Club Inc.

Proposer Name (Print): _____ Seconder Name (Print) _____

Proposer Signature: _____ Seconder Signature: _____